24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Congressional Leadership Fund	C C00504530			
Check if 24-hour report 48-hour report New report Amends report filed on				
Full Name of Payee American Media & Advocacy Group	Date of Public Distribution/Dissemination			
, i	10 21 2014			
Mailing Address 815 Slaters Lane	Amount			
City State Zip Code	572925.20			
Alexandria VA 22314	Transaction ID : 001 Date of Disbursement or Obligation			
Purpose of Expenditure TV/media placement Category/ Type 004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office	ce Sought: X House District: 02			
Ron Barber Oppose	President Senate State: AZ			
Calendar Year-To-Date Per Election for Office Sought Dist 2014	oursement For: Primary General Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
American Media & Advocacy Group	10 21 2014			
Mailing Address 815 Slaters Lane	Amount			
City State Zip Code	103938.20			
Alexandria VA 22314	Transaction ID : 002 Date of Disbursement or Obligation			
Purpose of Expenditure TV/media placement Category/ Type 004	10 15 / 2014			
Name of Federal Candidate Support Office	ce Sought: House District: 02			
Ron Barber Oppose	President Senate State: AZ			
Calendar Year-To-Date Per Election for Office Sought Dis 201	bursement For: Primary			
(a) SUBTOTAL of Itemized Independent Expenditures	676863.40			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Caleb Crosby [Electronically Filed] Date	10 22 2014			
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		TOTILO		PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
Congressional Leadership) Fund		С	C00504530
Check if X 24-hour report 48-hour report New report Amends report filed on				
Full Name of Payee Push Digital			M = M	c Distribution/Dissemination
Mailing Address PO Box 7431			10 Amount	21 2014
City	State	Zip Code		50000.00
Columbia	SC	29202	Transaction Date of Disbu	
Purpose of Expenditure Digital advertising		Category/ Type 004	M 10	01 2014
Name of Federal Candidate		Support	Office Sought:	X House District:02
Ron Barber		X Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sough	ıt 9	998831.60	Disbursement For: 2014 Other (sp	Primary
Full Name of Payee Push Digital			Date of Publi	ic Distribution/Dissemination
Mailing Address PO Box 7431			Amount	21 2511
City	State	Zip Code		110000.00
Columbia	sc	29202	Transaction II Date of Disb	D: 004 ursement or Obligation
Purpose of Expenditure Digital advertising		Category/ Type 004	10	14 2014
Name of Federal Candidate		Support	Office Sought:	House District: 02
Ron Barber		Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sough	nt	998831.60	Disbursement For: 2014 Other (s	Primary
(a) SUBTOTAL of Itemized Indepe	ndent Expenditures		. >	160000.00
(b) SUBTOTAL of Unitemized Inde	pendent Expenditures		· •	
(c) TOTAL Independent Expenditu	res		•	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Caleb Crosby	[Electron	ically Filed] Date	10 / 22	2014
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)			FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼				
Congressional Leade	C C00504530			
			C 000004000	
Check if 24-hour report	48-hour report New rep	port Amends repo	rt filed on	
Full Name of Payee	Advagagy Craves		Date of Public Distribution/Dissemination	
American Media &	Advocacy Group		10 21 Y Y Y Y	
Mailing Address 815 Slaters	s Lane		Amount	
City	State	Zip Code	42303.20	
Alexandria	VA	22314	Transaction ID : 005 Date of Disbursement or Obligation	
Purpose of Expenditure Radio placement		Category/ Type 004	10 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate)	Support	Office Sought: X House District: 02	
Ron Barber		X Oppose	President Senate State: AZ	
Calendar Year-To-Date Per Election for Office	Sought	998831.60	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶	
Full Name of Payee			Date of Public Distribution/Dissemination	
Rose, Moser, Allyn	Public & Online Relations		10 21 Y Y Y Y Y Y Y Y	
Mailing Address 7144 E.	Stetson Drive			
Suite 40	00		Amount	
City	State	Zip Code	5000.00	
Scottsdale	AZ	85251	Transaction ID : 006 Date of Disbursement or Obligation	
Purpose of Expenditure Media production		Category/ Type 004	10 21 2014	
Name of Federal Candidate)	Support	Office Sought: House District: 02	
Ron Barber		X Oppose	President Senate State: AZ	
Calendar Year-To-Date Per Election for Office		998831.60	Disbursement For: Primary General	
	·		Other (specify) -	
(a) SUBTOTAL of Itemized Independent Expenditures				
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Exp	enditures		•	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Caleb Crosby	[Electron	nically Filed] Date	10 22 2014	
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48			
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Congressional Leadership Fund	C C00504530			
	M = M / D = D / Y = Y = Y			
Check if 24-hour report 48-hour report New report Am	nends report filed on			
Full Name of Payee Something Else Strategies	Date of Public Distribution/Dissemination			
	10 21 Y 2014			
Mailing Address 212 Golden Willow Ct	Amount			
City State Zip Code	51350.00			
Easley SC 29642	Transaction ID : 007 Date of Disbursement or Obligation			
Purpose of Expenditure TV/media production Category/ Type	004 10 / 21 / 2014			
Name of Federal Candidate	Support Office Sought: X House District: 02			
Ron Barber	Oppose President Senate State: AZ			
Calendar Year-To-Date Per Election for Office Sought 998831.60	Disbursement For: Primary ☐ General 2014 Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
Arena Communications	10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1780 Sequoia Vista Circle	Amount			
City State Zip Code	21105.00			
Salt Lake City UT 84104	Transaction ID: 008 Date of Disbursement or Obligation			
Purpose of Expenditure Direct mail Category/ Type	004			
Name of Federal Candidate	Support Office Sought: House District: 02			
Ron Barber	Oppose President Senate State: AZ			
Calendar Year-To-Date Per Election for Office Sought 998831.60	Disbursement For: Primary			
-				
(a) SUBTOTAL of Itemized Independent Expenditures	72455.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	956621.60			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Caleb Crosby [Electronically Filed] Signature	Date 10 22 2014			
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